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CALIFORNIA NEEDS YOU!*

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Dean, School of Public Health, University of California, and President, State Board of Public Health

California's opportunities for careers in health are as varied as they are numerous. Some will fit the intense individualist, the gregarious, the introvert, the whiz in mathematics (even if he is a dub in English), one with facility in language despite a blind spot in math, the person who shivers at spiders and the one who is a fervent biologist.

There is one common denominator, a desire to give a lift to one's fellow, to help make this California of ours a healthier and happier place.

The health field is wide open for the alert and interested high school and college student. My colleagues in medical schools tell me that no longer is there a dearth of places but that any academically adequate student can get admitted to some medical school. Last fall I attended a conference at the National Institutes of Health in which science writers, high school teachers, research workers, medical practitioners and public health workers spoke of the wide-open opportunity in health careers.

A few months ago our School of Public Health met with student advisers from junior colleges and state colleges to discuss our school's training resources. Last week I lunched with my friends of the California State Department of Public Health; its Chief of the Division of Preventive Medicine was host to a promising University of California undergraduate

before whom he was blandishing the challenges and opportunities in public health. Last year Congress made available 1 million dollars for training stipends for those who wished advanced programs in the public health field. The response was tremendous. Announced in July, all of the money was allocated. This year the amount was doubled. The stipends pay tuition, \$250 per month with those having bachelor's degrees, \$300 monthly post-master's, and \$400 per month post-doctor's. All pay \$30 per month additional for each dependent.

These training stipends are a recognition by Congress of the pressing health needs of our Nation and are an encouragement to those of you interested in public health careers. I should add that these stipends are not for the initial degree such as a B.S. for a sanitarian, a laboratory worker or even a physician, but provide their advanced training for public health.

There is an intense interest of health workers in recruitment. With our population increasing so rapidly, we have many more people to keep well. Moreover, all of our old health problems still are with us and only eternal vigil keeps us protected against the diseases we "conquered." Every little while diphtheria crops up and is kept in check only by keeping up our toxoid immunization. A couple of years ago we relaxed our guard and whooping cough swooped up again. Only constant immunization will keep polio down.

Asiatic Flu Today—What Tomorrow?

Moreover, the really effective measures we now possess for prevention of disease require the participation of a vast army of health workers. Recently, influenza has not bothered us much, but right now we are in the throes of a really justified scare with "Asiatic" flu.

Our problem of Asiatic influenza is an example of the role played by modern health personnel. First, there are the doctors and nurses needed to take care of the initial patients. Then when the public health department is notified, the local public health nurse and the epidemiologists get on the job. They collect blood specimens and may get throat washings to have the public health laboratory workers confirm the diagnosis and find precisely the strain of virus causing the mischief. The local health officer checks with the State Health Department and its array of physicians, laboratory workers and biostatisticians go to work while their opposite numbers in the Federal Government collate. Meanwhile the chemists, virologists and a vast array of skilled technicians in our Nation's biological manufacturing companies are working like mad to prepare the thousands of gallons of vaccine which are necessary to protect against this specific strain of Asiatic flu.

Others who manufacture the "miracle drug" antibiotics are redoubling their efforts to have them ready against secondary bacterial invaders which get a toe hold in lung tissue weakened by the flu virus. These vaccines and antibiotics will be dispensed

* A condensation of an article originally published in the September-October issue of the *Mirror*, California Tuberculosis and Health Association.

by skilled pharmacists who know how to preserve them. Then the physicians and nurses will give them to the patients, some of whom will be tested to be sure the vaccine is potent.

The health educators of the health departments will work with the physicians, the press and their public as the liaison of the whole public health team. They will aid in getting the public to go to their physicians for their protective shots. Their skill must be great in enlisting the demand without overselling and creating a panic. The health officer, public health nurses, sanitarians, social workers, statisticians, laboratory workers all will be in on this act.

Tuberculosis Still Ready—Waiting

An example of the complexities of our modern attacks on disease is seen in tuberculosis. No longer are extended periods of hospitalization the rule, but now the public health nurse checks on the home situation, optimally aided by the social worker. The rehabilitation experts are active participants. The supervision of the drugs singly or generally in combination requires skill, experience and additional laboratory facilities.

While the death rates of tuberculosis have plummeted, the number of those detected with tuberculosis has not yet been significantly reduced. But with the revolution in the treatment patterns and the continued necessity for vigilance in detection of infections, the flexibility and leadership of the Tuberculosis Association are acutely needed. Thus our total needs for health personnel to combat the "white scourge" are unassuaged.

We all recognize that the acute communicable diseases are being leashed, thanks to resources we have just considered. However, the problems of suburbanization have made all of our sanitation problems much more complex. With our need of recreation and tremendous increase in population, our Legislature has emphasized that even water reservoirs must be used for fishing and much more complicated protection against pollution results.

Hence we have greater and greater need for skilled public health engineers and sanitarians. The tremendous increase in use of radioactive isotopes requires a new array of health

workers which we lag dangerously in providing.

As our population lives longer we become eligible for the diseases of older ages and here we have especial need for rehabilitation experts. We see we can use the specialist physicians, the physical therapists, occupational therapists, vocational counselors and social workers as members of the health team. Moreover, coronary heart disease which struck President Eisenhower, cancer which affected Secretary of State Dulles, and arthritis which cripples millions, are chronic diseases assaulting us in rapidly increasing numbers as the communicable diseases spare us. These chronic diseases seem to have several interrelating causative factors and the programs against them require a correspondingly far greater array of skilled health workers.

California has just established its Community Mental Health Act and now there will be a further upsurge in demand for psychiatrists, clinical psychologists, psychiatric social workers, psychiatric public health nurses.

We in public health really need you! The voluntary health agencies, state and local, have a great need for workers but we do not have a census of the number of their positions. The State Health Department reports that this year with approximately 3,000 budgeted positions in health departments of California—nearly 10 percent are vacant! In the California State Department of Public Health itself 41 of 527 positions are vacant.

Fortunately for all interested, there are ample facilities in our State for training in nearly all of the health fields. For those whom we interest in public health—family physicians to the community—we are specially fortunate. Many of the state colleges have such programs for first-level training in voluntary agencies and health departments, as do Stanford and U. S. C. in some areas.

The University of California has a statewide School of Public Health with its main settings at Berkeley and Los Angeles. The only accredited School of Public Health west of the Mississippi, the University of California School of Public Health was established by an act of the Legislature in 1943. Its bachelor of science pro-

gram trains first-level sanitarians, public health laboratory workers, health educators, biostatisticians and administrators. The advanced master's programs train for the whole broad field of public health and for most of these special areas the training stipends we mentioned are available.

Here, then, are rich opportunities for a full and exciting life. These have just been described by one of our Nation's "greats" in public health, Wilson G. Smillie. Entitled "Experiences in Preventive Medicine," Dr. Smillie's paper in the July, 1957, *Medical Clinics of North America* vividly describes advances during his 50 years in public health:

In retrospect, I find it hard to realize that all the events I have presented in this brief review have occurred in the span of a single professional lifetime. There are literally millions of people who are now alive and healthy, who would have been in their graves but for the advances that have been made during this period in medical science and in the application of public health measures. It has been my privilege to have been associated with, and actually to know personally a major number of people who wrought this miracle.

As a child, studying the Bible in our little Sunday school, I read of the "miracles," and often wondered if it would ever be my lot actually to see a miracle. I can truly say at the end of a long life that I not only have seen, but participated in, one of the greatest miracles that the world has ever seen. "Those who were dead are now alive."

It has been an exciting and highly rewarding life experience; one could not possibly have had greater opportunities for productive effort, and for task fulfillment.

No one can foretell the future, but I have great confidence in the prediction that the next 50 years will bring advances in the whole broad field of preventive medicine, and in the promotion of public health, fully as great as the extraordinary events of the past half century.

Won't you carry on this torch and light the way for a new generation in the year 2000?

NCPHA Meeting

The Northern California Public Health Association will meet January 17, 1958, at 3 p.m. in the San Mateo County Health Department to hear a report by the project staff of the San Mateo Disordered Behavior Study. A dinner meeting at the Villa Chartier in San Mateo will follow. Dr. Malcolm H. Merrill, Director, California State Department of Public Health, will report on his recent trip to Russia.

ADVISORY COMMITTEES AND CONSULTANTS FOR 1958 APPOINTED

The State Board of Health appointed advisory committees and consultants to serve during 1958 at their December 13th meeting in Los Angeles. As in the past the advisory committees and consultants will continue their valuable guidance services to the ongoing programs of public health in California.

This year five new advisory committees have been appointed. They are: Alcoholic Rehabilitation, Regional Rabies, Local Projects, Health Effects of Air Pollution, and the Ad Hoc Committee on Influenza. (See previous issues of *California's Health*.) A sixth advisory committee, Pet Bird, was retitled from Psittacine Bird Banding to conform with the wording in the Health and Safety Code.

The 1958 advisory committees are as follows:

ADVISORY COMMITTEES

Alcoholic Rehabilitation

Alfred Auerback, M.D., San Francisco;
Supervisor Sidney L. Cruff, Selma;
Wilbert L. Hindman, Ph.D., Professor of Business Administration, University of Southern California, Los Angeles;
Mr. Edwin I. Power, Sr., The Nut Tree Restaurant, Vacaville;
The Honorable J. Howard Ziemann, Judge of the Los Angeles County Superior Court.

Health Effects of Air Pollution

Juan Arcellana, M.D., Veterans Administration Hospital, Livermore;
Julius Comroe, Jr., M.D., University of California Medical Center, San Francisco;
Charles Hine, M.D., University of California Medical Center, San Francisco;
W. Bradley King, Jr., M.D., Department of Pathology, University of California, Los Angeles;
Charles Leftwich, M.D., Internist, San Jose;
Dr. Frederick H. Myers, Assistant Professor of Pharmacology, University of California, Berkeley;
Victor Richards, M.D., Professor of Surgery, Stanford Medical School, San Francisco;
Stanley Rokaw, M.D., Chief, Physiologic Research, Rancho Los Amigos Hospital, Hondo;
Bernard D. Tebbens, Sc.D., Associate Professor of Industrial Hygiene Engineering, University of California, Berkeley;
Roger Wilson, M.D., University of California Medical School, San Francisco.

Prevention of Blindness Project

George H. Blasdel, D.O., Los Angeles;
Mr. B. J. Callaghan, Superintendent, Liberty Union High School District, Brentwood;
Glenn R. Dorius, M.D., Oakland;
Mrs. Burnetta Downing (alternate for Mrs. Gradle), Executive Director, California Chapter, National Society for Prevention of Blindness, Los Angeles;

Mrs. Audrey H. Gradle, National Society for Prevention of Blindness, Beverly Hills;
Michael J. Hogan, M.D., University of California, School of Medicine, San Francisco;
David D. Holaday, M.D., Medical Department, American Can Company, San Francisco;
S. Rodman Irvine, M.D., University of California, School of Medicine, Los Angeles;
L. Hugo Lucie, M.D., San Diego;
Edward Lee Russell, M.D., Health Officer, Orange County;
Kenneth B. Stoddard, Ph.D., Dean, School of Optometry, University of California, Berkeley.

Blood and Blood Derivatives

Jesse W. Allen, M.D., Director, Blood Program, American National Red Cross, San Francisco;
T. S. Kimball, M.D., Glendale;
George D. Maner, M.D., Los Angeles;
Curtis E. Smith, M.D., San Francisco;
John R. Upton, M.D., San Francisco.

Cannery Inspection Board

George A. Gooding, California Packing Corporation, San Francisco;
Allan D. Lynn, Bonnie Dog Food Company, Sacramento;
S. J. Tupper, Olive Products Company, Oroville;
Gilbert C. Van Camp, Van Camp Sea Food Company, Inc., Terminal Island.
And Statutory Members
K. F. Meyer, M.D., San Francisco; and
Malcolm H. Merrill, M.D., State Director of Public Health.

Clinical Laboratory Technology

NORTHERN COMMITTEE

Donald L. Bittner, M.D., Department of Pathology, Stanford Medical School, San Francisco;
John W. Hamlin, M.D., Menlo Park;
Herbert G. Johnstone, Ph.D., University of California, School of Medicine, San Francisco;
William N. Reich, Walnut Creek;
Mrs. Mavis Smith, Palo Alto.

SOUTHERN COMMITTEE

H. Russell Fisher, M.D., Los Angeles;
Harrison M. Kurtz, Ph.D., Department of Bacteriology, University of Southern California, Los Angeles;
Joe A. Lazaroni, Jr., Ph.D., San Bernardino;
E. K. Markell, M.D., Department of Infectious Diseases, University of California, School of Medicine, Los Angeles;
Miss Leola Westover, Los Angeles.

Crippled Children Services

Carolyn B. Albrecht, M.D., Health Officer, Marin County;
Maxwell Andler, M.D., Consulting Physician, Physically Handicapped Children's Program, Los Angeles;
Mr. Lawrence Arnstein, Executive Director, San Francisco Social Hygiene and Health Association, San Francisco;
Warren L. Bostick, M.D., Assistant Professor of Pathology, University of California Hospital, San Francisco;

Merle Cosand, M.D., Health Officer, San Bernardino County;
Lily G. Harris, D.O., Oakland;
Carl Horn, M.D., Sacramento;
Mr. S. C. Jackson, Supervisor, County of Siskiyou;
Bruce Jessup, M.D., Palo Alto;
Horace Klabunde, M.D., San Francisco;
James C. MacLaggan, M.D., San Diego;
Russell Mapes, M.D., Beverly Hills;
Louis Martin, M.D., Los Angeles;
James J. McGoldrick, Loma Vista Pharmacy, Oakland;
Burt L. Davis, M.D., Academy of General Practice, Palo Alto;
Leon Oliver Desimone, M.D., Academy of General Practice, Los Angeles;
Sanford R. Dietrich, M.D., Santa Barbara;
Charles L. Dimmler, M.D., Pediatrician, Oakland;
Mr. W. P. Germain, San Francisco;
Mr. Warren E. Griffith, Executive Director, California Society for Crippled Children, San Francisco;
Roy A. Ouer, M.D., San Diego;
Mrs. Marvin Owen, North Hollywood;
Arthur Parmelee, Jr., M.D., University of California Medical Center, Los Angeles;
Abraham B. Sirbu, M.D., San Francisco;
Francis Sooy, M.D., San Francisco;
Dwight H. Trowbridge, M.D., Fresno;
W. Elwyn Turner, M.D., Health Officer, Santa Clara County;
Omer W. Wheeler, M.D., Riverside.

Dental Health

R. W. McNulty, D.D.S., Dean, School of Dentistry, University of Southern California, Los Angeles;
Edwin J. Ropes, D.D.S., California State Dental Association, Woodlake;
Charles T. Smith, D.D.S., Southern California State Dental Association, San Diego;
Elbert H. Smith, D.D.S., Fresno;
Edmund V. Street, D.D.S., College of Dentistry, University of California, San Francisco;
John Tocchini, D.D.S., Dean, School of Dentistry, College of Physicians and Surgeons, San Francisco.

Fisheries (Technical)

Herbert C. Davis, Assistant Executive Director, California Fish Cannery Association, Terminal Island;
Jack Gorby, California Marine Curing and Packing Company, Terminal Island;
William S. Hamm, Westgate-California Tuna Corporation, San Diego;
Dr. Sven Lassen, Chairman, Van Camp Sea Food Company, Terminal Island;
J. E. McConkie, California Packing Corporation, San Francisco;
Thomas N. Miller, Washington Packing Corporation, San Francisco;
Joseph Olivieri, Santa Cruz Canning Company, Moss Landing;
Robert K. Pedersen, Star Kist Foods Company, Terminal Island;
T. D. Sanford, F. E. Booth Company, Inc., San Francisco;
C. T. Townsend, National Cannery Association, Berkeley.

Influenza (ad Hoc)

Henrik L. Blum, M.D. (or a designated alternate), Health Officer, Contra Costa County;
 Warren L. Bostick, M.D., Assistant Professor of Pathology, University of California, Medical Center, San Francisco;
 Dave F. Dozier, M.D., Sacramento;
 J. Gordon Epperson, D.O., Oakland;
 Irving Gordon, M.D., Department of Microbiology, University of Southern California, Medical School, Los Angeles;
 James C. MacLaggen, M.D., San Diego;
 James J. McGoldrick, Oakland;
 K. F. Meyer, M.D., Director, George Williams Hooper Foundation, San Francisco;
 George D. Monardo, Chairman, Council Professional Practices, California Hospital Association, San Francisco;
 Lowell Rantz, M.D., Professor of Medicine, Stanford School of Medicine, San Francisco;
 A. Fred Rasmussen, Jr., M.D., Department of Infectious Diseases, University of California, School of Medicine, Los Angeles;
 E. B. Shaw, M.D., San Francisco;
 Charles E. Smith, M.D., Dean, School of Public Health, University of California, Berkeley;
 Omer W. Wheeler, M.D., Riverside.

Use and Care of Laboratory Animals

Gerson Biskind, M.D., Ph.D., San Francisco;
 Morris Bunow, Oakland;
 Bennett J. Cohen, D.V.M., University of California, Office of Animal Care, Los Angeles;
 Jerome T. Fishgold, M.D., Ph.D., Stanford University Medical School, Department of Pharmacology, San Francisco;
 Joel F. Gustafson, Ph.D., Associate Professor of Biological Science, Division of Natural Sciences, San Francisco State College.

Local Projects

Robert H. Alway, M.D., Acting Dean, School of Medicine, Stanford University Hospital, San Francisco;
 Henrik L. Blum, M.D., Health Officer, Contra Costa County;
 Merle Cosand, M.D., Health Officer, San Bernardino County;
 Mr. Albert G. Feldman, Director, Health Division, Welfare Planning Council, Los Angeles Region;
 L. S. Goerke, M.D., Associate Dean, School of Public Health, University of California at Los Angeles;
 Charles A. Preuss, M.D., Santa Barbara;
 Ellis D. Sox, M.D., Health Officer, City and County of San Francisco;
 R. A. Stallones, M.D., University of California, School of Public Health, Berkeley;
 Malcolm S. M. Watts, M.D., Assistant Dean, School of Medicine, University of California Medical Center, San Francisco.

Maternal and Child Health

John M. Adams, M.D., Professor and Chairman, Department of Pediatrics, University of California Medical Center, School of Medicine, Los Angeles;
 Mr. Jay Akin, Superintendent, Merced County Hospital;
 Mrs. P. D. Bevil, Sacramento;
 Charles Cutler, M.D., Sacramento;

Miss Alice Denhard, Assistant Clinical Professor of Obstetric Nursing, Stanford School of Nursing, San Francisco;
 Wayne Dooley, D.O., Los Angeles;
 A. J. Franz, M.D., San Francisco;
 Donald C. Harrington, M.D., Stockton;
 I. D. Litwack, M.D., Health Officer, City of Long Beach;
 Ernest W. Page, M.D., Chairman, Department of Obstetrics and Gynecology, University of California, School of Medicine, San Francisco;
 Mrs. Russell Scott, President, California Congress of Parents and Teachers, Salinas;
 Donald Shelby, M.D., Los Angeles;
 Robert C. Smithwick, D.D.S., Sunnyvale.

Morbidity Research Project

Rodney R. Beard, M.D., Professor of Public Health and Preventive Medicine, Stanford School of Medicine, San Francisco;
 M. I. Gershenson, Chief, Division of Labor Statistics and Research, Department of Industrial Relations, San Francisco;
 James C. MacLaggen, M.D., San Diego;
 J. Norman O'Neill, M.D., Los Angeles;
 E. L. Place, Business Manager, St. Helena Sanitarium;
 George S. Roche, Chief, Research and Statistics, Department of Employment, Sacramento;
 Edward S. Rogers, M.D., Professor of Public Health and Medical Administration, School of Public Health, University of California, Berkeley;
 J. R. Sauerwein, Jr., Claims Manager, Blue Cross Plan, Los Angeles;
 Charles E. Smith, M.D., Dean, School of Public Health, University of California, Berkeley;
 Bert S. Thomas, M.D., Medical Director, Department of Employment, Sacramento;
 C. V. Thompson, M.D., Lodi;
 Jacob Yerushalmy, Ph.D., Professor of Biostatistics, School of Public Health, University of California, Berkeley.

Pet Bird

Mr. Bruce Barnard, President, Pacific Budgie Association, Sacramento;
 Nicholas Becker, Cupertino;
 Harold Burgner, Oakland;
 R. J. Conrick, Los Angeles;
 Mr. William G. Coward, Los Angeles;
 Mrs. Ruth Drew, Modesto;
 Mr. Emerson Pinney, Chairman, Orange County Bird Club, Santa Ana;
 Ansel Robison, San Francisco;
 C. M. Wagner, Santa Ana.

Prophylaxis of Poliomyelitis (ad Hoc)

Jesse W. Allen, M.D., American Red Cross, San Francisco;
 George Argy, National Foundation for Infantile Paralysis, Sacramento;
 Herbert Bauer, M.D., Health Officer, Yolo County;
 Elmer M. Bingham, M.D., Health Officer, San Joaquin Local Health District;
 Warren L. Bostick, M.D., Assistant Professor of Pathology, University of California Hospital, San Francisco;
 John Chapman, M.D., Associate Professor of Epidemiology, School of Public Health, University of California, Los Angeles;
 Jack Chudnoff, M.D., Los Angeles;

J. Gordon Epperson, D.O., Oakland;
 Mrs. Evelyn S. Hartley, Director of Health, California Congress of Parents and Teachers, San Diego;
 Harry Henderson, M.D., Santa Barbara;
 James C. MacLaggen, M.D., San Diego;
 James C. Malcolm, M.D., Health Officer, Alameda County;
 Samuel J. McClendon, M.D., San Diego;
 James J. McGoldrick, Oakland;
 K. F. Meyer, M.D., Director, Hooper Foundation, University of California, San Francisco;
 E. B. Shaw, M.D., San Francisco;
 Charles E. Smith, M.D., Dean, School of Public Health, University of California, Berkeley;
 Walter Ward, M.D., Cutter Laboratories, Berkeley;
 Omer W. Wheeler, M.D., Riverside.

Regional Rabies**REGION I**

J. B. Askew, M.D., Health Officer, San Diego County;
 Mrs. Margaret Bliss, Manhattan Beach;
 Mr. Ned Clinton, Westminster;
 Mr. George M. Crosier, Los Angeles;
 Supervisor John Anson Ford, Chairman, Los Angeles County Board of Supervisors;
 Chester A. Maeda, D.V.M., San Bernardino;
 Hon. Norris Poulson, Mayor, City of Los Angeles;
 Frederick A. Veitch, M.D., Riverside;
 Mrs. Evelyn Waer, Roylyn Kennels, Garden Grove.

REGION II

Mr. Harold Appleford, Delano;
 Robert A. Beck, D.V.M., Modesto;
 A. Frank Brewer, M.D., Merced County Health Officer;
 Mr. W. B. Camp, Jr., Bakersfield;
 Hon. C. Cal Evans, Mayor, City of Fresno;
 Supervisor Norman E. Foley, Chairman, Fresno County Board of Supervisors;
 David L. Green, Jr., M.D., Stockton;
 Mr. G. L. Rambo, Fresno;
 Mr. John Snyder, Valley Springs.

REGION III

Hon. Floyd O. Bohnett, Mayor, City of Santa Barbara;
 Mr. Robert Bowen, Watsonville;
 Clinton R. Bryner, D.V.M., Soledad;
 Mr. John T. Culbertson, Ventura;
 Russell S. Ferguson, M.D., Health Officer, Santa Cruz County;
 E. Nelson Moore, M.D., Hollister;
 Mr. Derek Rayne, Carmel;
 Supervisor William J. Redding, Chairman, Monterey County Board of Supervisors;
 Mr. Fred Righetti, San Luis Obispo.

REGION IV

Miss Ruth Appel, San Francisco *Chronicle*, San Francisco;
 Joseph M. Arburua, D.V.M., San Francisco;
 Mr. John Baumgartner, Jr., San Martin;
 Walter H. Brignoli, M.D., St. Helena;
 Hon. George J. Christopher, Mayor, City of San Francisco;
 Sterling S. Cook, M.D., Napa County Health Officer;
 Mr. Gerald R. Dalmadge, San Francisco;
 Mr. James Fulmor, Dixon;
 Supervisor Leland W. Sweeney, Chairman, Alameda County Board of Supervisors.

REGION V

Supervisor Elwyn L. Lindley, Chairman, Humboldt County Board of Supervisors; James B. Massengill, M.D., Ukiah; Mr. L. H. McIntire, Kelseyville; Lester S. McLean, M.D., Humboldt County Health Officer; Mr. Harold Prior, Eureka; Mr. Charles Runyon, Talmadge; Mr. Andrew Scheubeck, Covelo; Hon. Oscar W. Swanlund, Mayor, City of Eureka; William H. Townsend, D.V.M., Smith River.

REGION VI

Mr. Lloyd Avilla, Red Bluff; Hon. Clarence L. Azevedo, Mayor, City of Sacramento; Supervisor Frank R. Elmer, Chairman, Sacramento County Board of Supervisors; Mr. R. W. Enderlin, Alturas; W. S. Lawrence, M.D., Gridley; Harry A. Snelbaker, D.V.M., Oroville; Donald R. Taves, M.D., Shasta County Health Officer; Mr. Ralph H. Taylor, Colfax; Mr. Gordon Van Vleck, Sloughhouse.

Reproductive Wastage (ad Hoc Technical)

John M. Adams, M.D., Professor and Chairman of the Department of Pediatrics, School of Medicine, University of California, Los Angeles; Jessie M. Bierman, M.D., Professor, Maternal and Child Health, School of Public Health, University of California, Berkeley; Roy W. Cauwet, M.D., Department of Obstetrics and Gynecology, Stanford School of Medicine, San Francisco; Moses Grossman, M.D., Assistant Professor of Pediatrics, University of California, School of Medicine, San Francisco; Donald C. Harrington, M.D., Stockton; Florence Hiscock, M.D., Department of Pediatrics, College of Medical Evangelists, School of Medicine, Los Angeles; Donald L. Hutchinson, M.D., Instructor in Obstetrics and Gynecology, School of Medicine, University of California, Los Angeles; Howard A. Joos, M.D., Associate Professor of Pediatrics, University of Southern California, School of Medicine, Los Angeles; Charles F. Langmade, M.D., Instructor, Obstetrics and Gynecology, University of Southern California, School of Medicine, Pasadena; Luigi Luzzatti, M.D., Assistant Professor of Pediatrics and Preventive Medicine, Stanford Medical School, San Francisco; Ervin E. Nichols, M.D., Professor, Obstetrics and Gynecology Department, College of Medical Evangelists, School of Medicine, Los Angeles; R. Elgin Orcutt, M.D., Department of Obstetrics and Gynecology, University of California, School of Medicine, San Francisco; Reuel A. Stallones, M.D., Lecturer in Epidemiology, School of Public Health, University of California, Berkeley; Curt Stern, Ph.D., Professor of Zoology, Department of Genetics, University of California, Berkeley; H. E. Thelander, M.D., San Francisco; W. Elwyn Turner, M.D., Health Officer, Santa Clara County;

Jacob Yerushalmy, Ph.D., Professor of Biostatistics, School of Public Health, University of California, Berkeley.

Residency Training

Rodney Beard, M.D., Professor of Public Health and Preventive Medicine, Stanford School of Medicine, San Francisco; Henrik L. Blum, M.D., Health Officer, Contra Costa County; Leo Cain, Ph.D., Dean, San Francisco State College; H. Gordon MacLean, M.D., Oakland; Ernest W. Page, M.D., University of California, School of Medicine, San Francisco; Edward Lee Russell, M.D., Health Officer, Orange County; Charles E. Smith, M.D., Dean, School of Public Health, University of California, Berkeley.

Sanitarians' Standards

Dean A. Anderson, Professor of Microbiology, Los Angeles State College of Applied Arts and Sciences; Richard Elliott, Director of Sanitation, San Bernardino County Health Department; James D. Gates, Sanitarian, San Luis Obispo County Health Department; James T. Harrison, M.D., Health Officer, Sonoma County; Myron W. Husband, M.D., Health Officer, Monterey County; Stanley Martin, Director, Bureau of Sanitation, Los Angeles County Health Department; G. A. McCallum, Professor of Biological Sciences, San Jose State College; Edward W. Munson, Director of Sanitation, Monterey County Health Department.

Sanitary Engineering

J. B. Askew, M.D., Health Officer, San Diego County; E. S. Bodine, Kent Woodlands, Kentfield; L. M. E. Boelter, Dean of Engineering, University of California; Edward A. Fairbairn, City Engineer, City of Sacramento; Hubert Ferry, Vice President, Union Oil Company, Fullerton; Roy O. Gilbert, M.D., Health Officer, Los Angeles County; C. Prugh Harnish, President, Southern California Water Company, Los Angeles; John A. Lambie, Los Angeles County Engineer; Robert C. Merz, Association Professor of Civil Engineering, University of Southern California, Los Angeles; William R. Seeger, General Manager, Marin Municipal Water District, San Rafael.

Training

Rodney Beard, M.D., Professor of Public Health and Preventive Medicine, Stanford Medical School, San Francisco; Mrs. P. D. Bevil, Sacramento; Dwight M. Bissell, M.D., Health Officer, City of San Jose; Neely D. Gardner, Acting State Training Officer, Training Division, State Personnel Board, Sacramento; William Griffiths, Ph.D., Associate Professor of Public Health, University of California, Berkeley; Mrs. Lulu K. Hassenplug, Dean, School of Nursing, University of California, Los Angeles;

Alvin Leonard, M.D., Health Officer, City of Berkeley; Mrs. Dalrie S. Lichtenstiger, Executive Secretary, California Tuberculosis and Health Association, San Francisco; John Phillips, City Manager, Berkeley; William M. Siegel, County Supervisors Association of California, Sacramento; Walter J. Tait, Senior Training Specialist, Standard Oil Company of California, San Francisco.

Vector Control

J. B. Askew, M.D., Health Officer, San Diego County; Elmer M. Bingham, M.D., Health Officer, San Joaquin Local Health District; Stanley B. Freeborn, Ph.D., Provost, College of Agriculture, University of California, Davis; C. Donald Grant, Manager, San Mateo County Mosquito Abatement District, Burlingame; Harold F. Gray, Engineer, Oroville; Jack H. Kimball, Manager, Orange County Mosquito Abatement District, Santa Ana; Stanley F. Martin, Director of Sanitation, Los Angeles County Health Department; John J. McElroy, Program Leader, Special Projects, Agricultural Extension Service, University of California, Berkeley; Frank M. Prince, Chief, San Francisco Field Station, U. S. Public Health Service; William C. Reeves, Ph.D., Professor of Epidemiology, School of Public Health, University of California, Berkeley.

State Advisory Hospital Council to Meet

Policies to be included in the 1958-1959 state plan for hospital and health center construction will be considered by the Advisory Hospital Council at its January 17, 1958, meeting in Berkeley. A subsequent policy meeting will be held in April for final determination of policies.

Major points under consideration by the council will include planning for psychiatric hospitals, long-term care facilities, medical education facilities and limitation of funds to individual hospital service areas.

Rural Health Conference

The Fourth Annual Conference on Rural Health will be held in Bakersfield on January 31-February 1, 1958. All persons interested in rural health are invited to attend.

More detailed program information will appear in subsequent issues of *California's Health*.

N. D. Hudson, of the U. C. Agricultural Extension Service, is chairman of the Rural Health Council.

31 Counties Declared "Rabies Areas"

Thirty-one counties have been requested by the California State Department of Public Health to establish control program incorporating vaccination of dogs against rabies. The counties were declared "rabies areas" by Malcolm H. Merrill, M.D., director of the department, after consultation and approval by the six Regional Rabies Advisory Committees established under the rabies control law passed by the last session of the Legislature.

A 60-day grace period to establish control programs was given to local governments within the "rabies areas." This period is the time required for the State Board of Health to adopt and put into effect regulations in accordance with the law. The board met December 13th in Los Angeles to consider the regulations.

The new law requires local government to enforce the following provisions:

1. Every dog over four months of age must be vaccinated against rabies.
2. All dogs under four months must be confined to the premises by the owner or keeper. However, this does not prevent the sale or transportation of a puppy four months old or younger.
3. Any dog in violation shall be impounded as provided by local ordinance.
4. The governing body of each city, county, or county within the "rabies area" must maintain or provide for the maintenance of a pound system and a rabies control program.

In addition, the law requires local government to provide accessible, public rabies vaccination clinics where inoculation charges will not exceed the cost of a vaccination. Dog owners, however, may have the dog vaccinated by any licensed veterinarian.

Declared "rabies areas" were the counties of:

Region 1—Los Angeles.

Region 2—Calaveras, Fresno, Kings, Madera, Mariposa, Merced, San Joaquin, Tulare, Tuolumne.

Region 3—Monterey, San Benito, Santa Cruz, Ventura.

Region 4—Napa, Solano, Sonoma.

Region 5—Lake, Mendocino.

Needed—Epidemiologists

Epidemiology is suffering from a shortage of personnel at all levels. "Two things are required to meet this situation: more interested medical leaders and more adequate training facilities." Of major concern, Dr. Thomas Parran points out, "is the matter of attracting additional competent physicians into the specialty of epidemiology, since present facilities, although limited, can train more students than apply."

Too few students who are fit for research are led towards epidemiology. Those who even hear of the term imagine it a specialty of earlier generations, applicable only to infectious diseases.

Epidemiologists need formal training in field methodology, biostatistics, and inductive and deductive reasoning. This should be combined with advanced study of one or another specific disease, accompanied by field research. "The majority are trained in schools of public health, where the bulk of their training deals with group concepts of populations and with the man-environmental interrelationships.

"There is now an equally interesting epidemiology of heart disease, of cancer, of mental illness, of arthritis, and of peptic ulcer—even of automobile accidents—to challenge superior talents." To do something constructive about this challenge, medical schools could strengthen their programs so as to "include dramatic illustrations of the population approach to the causes of some chronic diseases, and they can compete actively for those students who show promise of having that rare attribute, an original mind."

Journal of the American Medical Association, 163:742, March 2, 1957.

Region 6—Amador, Butte, Colusa, El Dorado, Glenn, Nevada, Placer, Shasta, Sutter, Tehama, Trinity, Yuba.

In none of the regions were all of the counties included in the declaration.

The Public Health Service estimates there are 250,000 cases of active tuberculosis in the United States.—*Medical News*, November 11, 1957

Air Measurement Network Set Up in Central Valley

A co-operative network of air pollution measurement stations is being set up in the Central Valley to collect daily samples of oxidant and particulate matter.

The network will establish measurement stations at the county seats of Sacramento, San Joaquin, Stanislaus, Merced, Fresno and Kern Counties. It is designed to assist in training local health department personnel in air pollution measurement.

The daily samples will be collected at mid-day, when the oxidant is normally at its highest. Smoke and dust will be measured continually.

Sacramento, San Joaquin and Merced Counties have begun their sampling and the others expect to join the network this fall. As the program develops, the California State Department of Public Health will receive information from the individual counties, analyze it and distribute the information; collect, analyze and distribute meteorological information and conduct special sampling projects to guide the efforts of the local health departments. It is hoped that by early next year at least one automatic recorder station will be established in the valley to supplement the present program.

Special studies by the Bureau of Air Sanitation of this department were made during the summer in Sacramento, Stockton, Fresno and Bakersfield to determine the variation of contamination in different parts of the cities and to determine the variation in oxidant concentration during the day. The results of these measurements were used to select the best place and time for the local departments to make their measurements. Similar work is planned for other seasons of the year to insure the collection of representative samples.

Much credit for the development of local support is due to the health officers of the valley counties, the San Joaquin Valley Citizens Committee on Air Pollution and the Joint Air Pollution Control Committee for the Sacramento Area.

Summary of Occupational Disease Attributed to Agricultural Chemicals

Pesticides and agricultural chemicals are invaluable to California's agricultural industry and in the control of certain diseases of man. However, many of these chemicals are potentially hazardous and their widespread application creates a problem in ensuring the health and safety of the workers who use them. In 1956, nearly 10,000,000 acres were treated for agricultural pest control. (An acre is counted each time it is treated.)

In an effort to assess the extent and the kind of health problems which have arisen from the use of these materials, the California State Department of Public Health summarizes reports of occupational disease attributed to pesticides and agricultural chemicals.

In 1956 there were 789 reports from 46 of California's 58 counties, an increase of 33 percent over the 531 reports received by the department in 1955.

Dermatitis appeared as a diagnosis in over half, or 403, of the 789 reports. There were 281 reports of systemic poisoning. In the remaining 105 reports, or 13 percent, the diagnoses were primarily respiratory illness and chemical burns.

Over 45 percent of the reports came from five counties: Los Angeles, 13; Fresno, 12; Kern, 9; Tulare, 7; and Riverside, 5 percent. These counties are among the leading agricultural counties in the State in terms of farm employment.

Last year in over 40 percent of the reports the offending chemical was not identified by the attending physician. Local health officers are co-operating with the California State Department of Public Health in a field study which will attempt to identify the unspecified chemicals involved.

Of those that were identified, organic phosphate pesticides and halogenated hydrocarbon pesticides were responsible for the largest number of occupational diseases, 29 and 9 percent respectively of the total number of reports.

The four fatalities were attributed to pesticides and agricultural chemicals. A timekeeper drank a solution

Reported Cases of Selected Notifiable Diseases

CALIFORNIA, MONTH OF DECEMBER, 1957

Disease	Cases reported this month			Cumulative cases from January 1		
	1957	1956	1955	1957	1956	1955
Amebiasis	152	100	48	1,933	915	634
Anthrax	--	2	--	1	2	--
Botulism	--	--	2	2	5	3
Brucellosis	3	4	4	44	31	52
Chancroid	9	4	11	61	81	132
Cholera	--	--	--	--	--	--
Coccidioidomycosis ¹	14	19	33	172	179	153
Conjunctivitis, acute infections of the newborn	1	1	2	5	8	10
Dengue	--	--	--	--	--	--
Diarrhea of the newborn	7	--	13	49	11	31
Diphtheria	1	--	11	9	28	27
Encephalitis, acute ²	25	19	29	507	507	374
Epilepsy	137	306	280	2,730	3,328	2,565
Food poisoning	134	71	39	1,223	1,698	1,371
Gonococcal infections	841	1,142	1,425	14,603	14,135	13,739
Granuloma inguinale	--	--	1	7	1	3
Hepatitis, infectious	81	196	201	1,699	1,842	1,770
Hepatitis, serum	8	7	9	93	84	56
Leprosy	--	2	--	13	9	17
Leptospirosis	4	--	2	5	3	4
Lymphogranuloma venereum	1	--	3	18	27	32
Malaria	5	6	2	38	49	31
Measles	476	738	1,220	53,013	31,391	67,561
Meningococcal infections	21	11	21	169	216	232
Mumps	906	1,500	3,570	18,455	32,908	33,711
Pertussis (whooping cough)	159	101	221	2,585	2,006	4,817
Plague	--	--	--	--	1	--
Poliomyelitis—total	31	99	284	672	2,045	1,928
Paralytic	25	60	157	279	1,310	1,047
Nonparalytic	6	39	80	393	735	881
Psittacosis	3	5	1	28	42	37
Q fever ³	--	1	2	39	54	17
Rabies, animal	12	11	58	174	273	365
Rabies, human	--	--	--	1	--	--
Relapsing fever	--	--	--	3	--	3
Rheumatic fever	6	14	11	126	121	188
Rocky Mountain spotted fever	--	2	--	--	3	4
Salmonellosis	71	60	100	1,467	1,020	958
Shigellosis	277	112	257	1,743	1,588	1,290
Smallpox	--	--	--	--	--	--
Streptococcal infections (including scarlet fever)	483	506	479	7,403	4,986	6,916
Syphilis	335 ⁴	420	711	5,504 ⁵	5,658	6,430
Tetanus	3	5	2	30	32	32
Trachoma	--	1	2	81	5	9
Trichinosis	1	--	1	8	9	9
Tuberculosis	504	437	577	6,016	6,542	6,672
Tularemia	--	--	--	2	4	4
Typhoid fever	6	6	9	77	97	95
Typhus fever, endemic	--	--	2	9	3	4
Typhus fever, epidemic	--	--	--	--	--	2
Yellow fever	--	--	--	--	--	--

¹ Since July 1, 1955, active primary (including cavity) and disseminated coccidioidomycosis reportable.

² Encephalitis, acute includes arthropod-borne infections, post infectious cases, and those with etiology undetermined.

³ NR—Not reportable prior to July 1, 1955.

⁴ Excludes 130 found positive by serologic survey (Mexican national farm workers at Border Reception Center, El Centro).

⁵ Excludes 10,561 found positive by serologic survey (Mexican national farm workers at Border Reception Center, El Centro).

of sodium arsenite by mistake, thinking it was water. A ginner working in the fertilizing department of his plant inhaled anhydrous ammonia. A fumi-

gator for a chemical company died of methyl bromide poisoning, as did a watchman for a local bean grower's organization.

Smoke Aids in Rodent Survey

The Alameda County Health Department has chanced upon a new method which enables them to quickly and efficiently detect rodent burrows leading out of sanitary sewer lines.

The discovery was an indirect result of a program of the Oakland Sewer Maintenance Division to determine storm and casual water entry into the sanitary sewers. The method, patterned after a Santa Cruz development, uses smoke bombs containing sulfur to force smoke into the sewers in order to detect broken sewer lines. Health department sanitarians observed that rodent burrows could be located at the same time by noting the issuance of smoke from them.

This method now gives the Health Department a mass survey technique for detecting rodent infestations and will increase the effectiveness of control programs. Since sewer mains are ideal rat breeding areas and provide excellent avenues of travel, it is essential that the rats be restricted to the sewers, minimizing health hazards and make sewer poisoning programs practical and effective.

First Aid Recommendations For Poisonings Available

The American Medical Association recently published the following report: "Recommendations of Committee on Toxicology on First-Aid Measures for Poisoning." The report includes measures to be taken before arrival of a physician in cases of swallowed poisons, inhaled poisons,

skin contamination, eye contamination, injected poisons, and chemical burns. A section on measures to prevent poisoning accidents is also included.

Reprints of this report may be obtained by writing to the Committee on Toxicology, American Medical Association, 535 North Dearborn Street, Chicago 10, Illinois.

Public Health Positions

Butte County

Public Health Nurse: Salary range, \$391 to \$486. Must be eligible for California Public Health Nursing certificate. Write, G. L. Faber, M.D., Director, Butte County Health Department, P. O. Box 1100, Chico.

Orange County

Public Health Analyst: Salary range, \$417 to \$516. Education equivalent to college graduation including courses in statistics. Write Orange County Personnel Office, 801-C North Broadway, Santa Ana.

Sacramento County

Social Worker Grade I: Salary range, \$412 to \$455. Completion of two years graduate work in medical or psychiatric social work. One year of experience may be substituted for one year of education.

Social Worker Grade II: Salary range, \$455 to \$553. Completion of two years of graduate work plus two years of experience in medical or psychiatric social work.

Applicants should contact Ira O. Church, M.D., Director, Sacramento County Health Department, 2221 Stockton Boulevard, Sacramento.

San Bernardino County

Sanitarian: Salary range, \$397 to \$483. Must have or be eligible for California registration.

Dairy Inspector: Salary range, \$397 to \$483. Must have qualified in state examination.

Public Health Analyst: Salary range, \$438 to \$532. College graduation with at least 12

units in statistics and two years experience including one year in public health required. Graduate work may be substituted for one year of experience and a master's degree in biostatistics for both years.

Write County Personnel Department, Third Street, San Bernardino.

Ventura County

Microbiologist: Salary range, \$403 to \$486. Requires California certification.

Sanitarian: Salary range, \$366 to \$450. Requires California registration.

Public Health Dentist: Salary range, \$1,122 to \$1,122. Requires California license.

For further details, write Personnel Department, Courthouse, Ventura.

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